The Positive Impact of Maternal, Infant, and Early Childhood Home Visiting (MIECHV) in Hawaii

MIECHV provides federal funds to states, territories, and tribal entities for voluntary, evidence-based home visiting services. Home visitors meet with parents one on one from pregnancy through their child’s kindergarten entry to help lay the foundation for the health, education, development, and economic self-sufficiency of the entire family. Visits by caring, experienced professionals who provide families support and connections to needed resources and services can help families leverage their strengths so they can thrive.

Since 2013, MIECHV has been level-funded at $400 million annually and pre-pandemic estimates showed MIECHV reached only 3-5% of eligible families nationwide. As MIECHV is set to expire on September 30, 2022, reauthorization offers Congress the opportunity to provide additional investments that will enable home visiting programs to reach more families. The National Home Visiting Coalition, of which FFYF is a member, recommends a five-year reauthorization that would increase funding by $200 million annually (reaching $1.4 billion in FY2027); doubling the MIECHV tribal set-aside from 3% to 6% to reach more families in American Indian and Alaska Native communities; and continuing to allow virtual home visiting implemented with model fidelity as a service delivery option for families who choose it.

In FY21:
$3,595,892 was awarded to the Hawaii State Department of Health

Within Hawaii, MIECHV provided/served:
565 families
7,537 home visits
561 children

Hawaii MIECHV Program At-a-Glance

Evidence-based models providing MIECHV-supported home visiting services in Hawaii include:

Hawaii Performance Highlights:

- **93.2%** of caregivers enrolled in home visiting were screened for intimate partner violence within 6 months of enrollment
- **86.2%** of infants enrolled in home visiting were always placed to sleep on their backs, without bed-sharing or soft bedding

**Data Reporting:** Successfully onboarded all local implementing agencies onto a single statewide database system to ensure consistency in data collection and reporting. Improved data access and transparency will aid continuous quality improvement efforts in general, impacting all benchmark measures.

Family Needs

States tailor their programs to meet community needs, with priority given to certain populations listed in the law.

In Hawaii:

- **67.7%** of households were low income
- **37.1%** of households included someone who used tobacco products in the home

Hawaii Families Receiving Home Visiting

<table>
<thead>
<tr>
<th>Race</th>
<th>White (15%)</th>
<th>Asian (12%)</th>
<th>Multiple (36%)</th>
<th>Native Hawaiian/Pacific Islander (36%)</th>
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</thead>
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To protect confidentiality, race categories with less than 10 respondents have been omitted. Percentages may not add to 100%

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<tr>
<th>Ethnicity</th>
<th>Hispanic or Latino (15%)</th>
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Potential Beneficiaries:

In Hawaii, an estimated 77,200 families could benefit from home visiting with sufficient funding.

- **43%** of families met one or more priority criteria.
- **13%** of families met two or more priority criteria.

104,500 children could benefit from home visiting with sufficient funding.

- **17%** Infants < 1
- **33%** Toddler 1-2
- **50%** Preschool 3-5

The estimated percentage of families who could benefit in Hawaii met the following priority criteria:

- **Child < 1** 20%
- **Single Mother** 19%
- **Parent with no high school diploma** 3%
- **Pregnant woman or mother < 21** 2%
- **Low income** 15%

References:
- National Home Visiting Resource Center (NHVRC) 2021 Yearbook
- MIECHV State Data Tables (FY2020)
- HRSA Home Visiting Program Fact Sheets